

Subjective well-being among young dancers with disabilities.

Imogen J. Aujla PhD¹ and Sarah C. Needham-Beck PhD²

*¹School of Performing Arts and Media, University of Bedfordshire**

²Department of Sport and Exercise Sciences, University of Chichester, UK

*Corresponding author:

School of Performing Arts and Media,

University of Bedfordshire,

Polhill Avenue,

Bedford

Bedfordshire MK41 9EA

01234 400 400

Imogen.aujla@beds.ac.uk

Abstract word count: 178

Manuscript word count: 3939

Number of references: 35

Number of tables: 1

Abstract

Little is known about the subjective wellbeing (SWB) of young dancers with disabilities and whether it changes over time. The aim of this study was to assess the SWB of young dancers with disabilities enrolled on an extracurricular inclusive talent development programme in the UK at two time points. Twenty-two young dancers completed the Personal Wellbeing Index for people with intellectual disability (Cummins & Lau, 2005) at the beginning of the academic year. Thirteen dancers completed the questionnaire a second time towards the end of the academic year. Scores were compared with normative values, and a Wilcoxon Signed Rank test was conducted to assess change over time. The participants reported high levels of SWB at both time points in comparison with normative values. There was no significant change in wellbeing scores over time. The study contributes to a growing body of literature suggesting that people with disabilities have high levels of SWB. Although causality cannot be assumed, inclusive dance programmes may contribute to SWB and allow young people with disabilities to overcome the barriers associated with physical activity.

Keywords: dancing, wellbeing, disability, talent

Introduction

The growth of positive psychology since the early 2000s has resulted in wellbeing, life satisfaction and quality of life becoming major areas of study. Wellbeing is often cited as a priority by many Western governments with the recognition that objective measures of economic growth and employment statistics do not reflect individuals' satisfaction with their lives. For instance, in 2010 the UK government launched a National Wellbeing Programme designed to assess subjective quality of life as a marker of wellbeing which revealed small increases year-on-year in average life satisfaction and happiness (Cabinet Office, 2013). Although a number of definitions of subjective wellbeing (SWB) exist, it is generally conceptualised as a global construct that reflects how individuals feel about their lives across a number of domains including satisfaction, fulfilment, achievement, autonomy, positive relationships and making a contribution to a community or society (Ryff, 1989, Ryff & Singer, 1996, 1998; Seligman, 2011; Shah & Marks, 2004).

The arts are often employed as a therapeutic tool or a means of enhancing wellbeing among various populations (e.g. Karkou & Glasman, 2004). Evidence from qualitative studies demonstrates the benefits of engaging in recreational arts activities for people with disabilities, such as improvements in self-esteem, interpersonal skills, and perceived competence (Ehrich, 2010; Fuller et al., 2009; Goodgame, 2007; Karkou & Glasman, 2004; Kinder & Harland, 2004; Ovenden, 2017; Zitomer, 2016). Dance may be a particularly valuable activity for promoting wellbeing as it involves physical, cognitive and affective components in the pursuit of creativity, self-expression, and technical expertise. Indeed, young people with disabilities can be engaged in dance for reasons other than therapeutic ones, such as to enhance their

skills and creativity. Doing so may contribute to their wellbeing via feelings of accomplishment, purpose and meaning (e.g. Ryff, 1989; Seligman, 2011). Studies of non-disabled young dancers in extracurricular training (Aujla, Nordin-Bates & Redding, 2014a) and professional freelance dancers (Aujla & Farrer, 2015) indicate that dance can provide numerous opportunities for enhanced wellbeing including enjoyment, autonomy, task mastery and achievement, and positive interpersonal relationships. Recent studies indicate that dancers without disabilities have relatively high levels of SWB according to related measures such as self-esteem (e.g. Aujla, Nordin-Bates, Redding & Jobbins, 2014b; Nordin-Bates et al., 2011). However, the lack of quantitative studies of young dancers with disabilities means that currently there is no baseline data available about SWB that could be compared with other populations and over a period of time.

In the context of skill development and progression, dance for people with disabilities could be defined as a serious leisure activity; that is, an activity that is personally meaningful, fulfilling, and requires systematic participation and dedication (Stebbins, 1992). Engaging in serious leisure pursuits such as volunteering, campaigning, sport, and singing have been associated with increased self-confidence, social inclusion, and competence among people with disabilities (e.g. Lee & McCormack, 2004; Patterson & Pegg, 2009; Roker, Player & Coleman, 1998; Tasiemski, Kennedy, Gardner & Taylor, 2005). In turn, these factors can enhance self-esteem, personal pride, and feelings of control, which are posited to contribute to overall feelings of life satisfaction (Patterson, 1996, 2000; Tasiemski et al., 2005). Similarly, recreational dance participation has been shown to increase self-concept, self-confidence, and social inclusion among participants without disabilities (for reviews see Burkhardt &

Brennan, 2012; Connolly & Redding, 2010). However, the SWB of young people with disabilities engaged in dance as a serious pursuit has yet to be examined. Therefore, this study aimed to investigate the SWB of young dancers enrolled on *IRIS*, an inclusive extracurricular talent development programme, over the course of an academic year.

Methods

Context

IRIS was designed by Stopgap Dance Company to foster technical and creative skills within a progressive contemporary dance syllabus. *IRIS* has four increasingly challenging levels: *include* (which builds foundation dance competencies), *respond* (small group or one-to-one work on more advanced technical skills), *integrate* (progression to mainstream classes in addition to continuing with *include* and *respond* levels), and *specialise* (individualised support tailored to the students' ambitions such as performing, teaching, or choreographing). The curriculum is being piloted over two years, and the current study is part of a larger research project examining *IRIS* over this period. All participants in the current study were at the *include* level, attending a 90 minute class once a week across the academic year. *Include* uses set exercises to explore and develop foundation dance skills such as dynamic range, contact dance, and performance ability. The syllabus was designed and taught by Stopgap teachers who have an established reputation of working with dancers and young people with disabilities.

Participants

Data were collected in the first pilot year of *IRIS* from four groups in the UK trialling the programme. A total of 22 young dancers (16 female, 6 male, aged 18.14 ± 7.52 years) volunteered to take part in the study. They had been dancing for on average 3.44 ± 2.60 years and had been attending *IRIS* for one year. Of the participants, 7 had an intellectual disability, either Down's Syndrome or autistic spectrum disorder; and 7 had a physical disability which was either cerebral palsy, a hip joint condition or tyrosine hydrolase deficiency. Eight of the participants had multiple (intellectual and physical) disabilities which included global development delay, Noonan's syndrome, achondroplasia, and chromosome 18p depletion. Due to restrictions on the students' timetables, 13 dancers from two of the groups (11 female, 2 male, aged 19.77 ± 5.42 years) completed the questionnaire at the second time point.

Measure

The Personal Wellbeing Index (PWI) was chosen for this study because data can be compared to normative values and different populations. It was derived from the Comprehensive Quality of Life Scale (Cummins, 1997) and represents the first level of deconstruction of life satisfaction. Parallel versions of the scale have been created for use with children and adolescents (PWI-SC), pre-school children (PWI-PS), and individuals with mild to moderate intellectual disability (PWI-ID; Cummins & Lau, 2005). As the majority of dancers in this study had either an intellectual disability or multiple disabilities which included an intellectual disability, the PWI-ID was administered to the entire sample.

The PWI-ID is an eight-item questionnaire. The first question represents the first level deconstruction of SWB (How happy do you feel with your life as a whole?); the next

seven questions address different domains of SWB. The item regarding religion/spirituality was removed for this version of the PWI due to its high level of abstraction (Cummins & Lau, 2005). Remaining items correspond to: health, standard of living, life achievement, personal relationships, personal safety, community-connectedness, and future security. The PWI-ID has demonstrated good reliability, validity, and test-retest reliability (McGillivray, Lau, Cummins & Davey, 2009).

Procedure

Once ethical approval was granted by a Higher Education Ethics Committee, information about the research was provided to the participants, their teachers and their families, and informed consent was provided by both the dancers and their parents. The procedure was discussed with the dancers prior to the testing to ensure they understood the nature of the research. The pre-test protocol for the PWI-ID described by Cummins and Lau (2005) was followed, which involves asking questions of increasing complexity in order to ensure that participants have sufficient understanding to complete the PWI-ID, and to identify an appropriate scale to use (i.e. using faces; reduced format scales). The response format for each participant matched the highest level of performance in the pre-testing questions. Once this was determined, the PWI-ID questions were read verbally, and the response recorded, by the researcher. The pre-testing and questionnaire administration took approximately 20 minutes per participant.

The PWI-ID was first administered in September, near the beginning of the academic year, and secondly in May-June (depending on the group). The academic year ended in July but the second data collection was organised earlier to reduce interference with

end-of-term rehearsals and performances. Testing took place in the *IRIS* studios so that the environment was familiar to the participants. The researcher was friendly and informal in order to establish trust and build rapport, and to help minimise acquiescent responding (Cummins & Lau, 2005).

Analysis

After cleaning and screening the data and checking for outliers, data were examined for any participants consistently scoring the minimum or maximum value (which may represent poor understanding or acquiescent responding). Two data sets from the first time point were removed as a result. Scores were then converted to a percentage of scale maximum as per the testing manual so that data scored using different response formats could be compared (Cummins & Lau, 2005). Means were calculated for each item, which were then summed and averaged to form a composite PWI variable. Due to the small sample size and the fact that the data were not normally distributed, a Wilcoxon Signed Rank test was used to examine change over time in the ‘happiness with life as a whole’ item and the composite PWI variable.

Results

The means and standard deviations for the seven items of the PWI-ID are reported in Table 1, along with the summed and averaged PWI variable, and the mean of the ‘happiness with life as a whole’ item. Standard deviations are large due to the use of reduced choice formats of the scale, and the standardisation process whereby all scores were made into percentages. The PWI-ID exhibited somewhat poor reliability at Time 1 ($\alpha = .52$) and removing items did not improve reliability. However, for

scales with less than 10 items, it is not unusual for Cronbach's alpha scores to be low (Pallant, 2005). The reliability of the scale was improved at Time 2 ($\alpha = .73$).

At Time 1, scores across the domains were somewhat similar, with the highest scores reported for 'personal relationships' and 'standard of living'. A slightly different pattern of results can be observed at Time 2, with 'standard of living' and 'feeling part of the community' scoring the highest.

The participants generally scored higher for most domains at Time 1 than Time 2, and subsequently the computed PWI and satisfaction scores were higher at Time 1 than at Time 2. Inspection of individual scores revealed that all but one of the participants who completed the PWI-ID at Time 1 only scored highly or very highly for each item, which helps to explain this finding. However, the results of the Wilcoxon Signed Rank test indicated that there was no significant change in these scores over time either for the PWI, $Z = -1.60, p > .05$ or for 'happiness with life as a whole', $Z = 0.00, p > .05$.

Discussion

The aim of this study was to examine the SWB of young dancers with disabilities enrolled on a talent development programme. According to Cummins and Lau (2005), the normative range for the PWI (summed and averaged score) is 70-80 points suggesting that at Time 1 the participants had slightly greater than average well-being (82.06 ± 13.77), and that they were still within this range at Time 2 (71.02 ± 19.86). The scores at Time 1 were also somewhat higher than those reported in a previous study of people with intellectual disability (McGillivray et al., 2009). This contributes

to a growing body of literature indicating that people with disabilities report high levels of SWB and as such do not necessarily need to be perceived as suffering or as victims (e.g. Cummins et al., 1997; Heady & Wearing, 1992; McGillivray et al., 2009).

Inspection of the individual domains reveals that at Time 1, scores across the domains were rather similar, with the highest scores reported for ‘personal relationships’ and ‘standard of living’. At Time 2, ‘standard of living’ and ‘feeling part of the community’ scored the highest. These findings are similar to those reported by McGillivray and colleagues (2009) whose participants scored ‘personal relationships’ and ‘feeling part of the community’ the highest. This also bears similarities to other studies of young people without disabilities who tended to score ‘personal relationships’, ‘feeling part of the community’, and ‘standard of living’ among the highest domains (Casas et al., 2012; Tomy & Cummins, 2011). Taken together these findings support the notion that positive relationships, and connection with or contribution to a community, are critical components of SWB (Ryff, 1989, Ryff & Singer, 1996, 1998; Seligman, 2011; Shah & Marks, 2004). Previous studies of young dancers with (Zitomer, 2016) and without disabilities (Aujla et al., 2014a) have highlighted the importance of positive relationships with both peers and teachers in dance classes; participating in an inclusive dance programme may provide opportunities to forge meaningful relationships with like-minded peers and members of the dance industry which contributes to SWB.

The lowest scores at both time points were for ‘future security’. This item was also scored the lowest or second lowest by school-aged children in previous studies (Casas

et al., 2012; Tomyn & Cummins, 2011). It may be that this item is somewhat abstract for young people with disabilities who are still living at home and dependent on others; the participants may have felt unable to predict their future security. Given that the participants were recruited from *IRIS* (an achievement context) the item ‘achievement’ was scored relatively low at Time 2, a finding mirrored in the study by Tomyn and Cummins (2011). Involvement in a talent development programme with its inherent high standards and expectations may promote the idea of achievement being an ongoing process; it would be interesting to observe if this score increased over a longer period of time as the participants progress through the different levels of *IRIS*.

Examination of mean values at Time 2 suggests a decrease in SWB over the course of the academic year. However, analysis revealed that this change was not statistically significant. This could in part be explained by the small sample size and the fact that participants who only completed the questionnaire at Time 1 tended to score very highly. Furthermore, this finding aligns with previous evidence that SWB (Eid & Diener, 2004) and related constructs such as self-esteem (Aujla et al., 2014b) show little variation over time. An explanation for this comes from the Theory of Subjective Wellbeing Homeostasis (Cummins, 2010) which posits that under normal circumstances, SWB is maintained within a limited range by internal (e.g. self-esteem, perceived control) and external (e.g. social support, financial stability) resources.

Some of the participants in the current study commented anecdotally during the data collection phases how much they loved and enjoyed dancing, and some were

particularly optimistic about dance and the future. Being part of a systematic talent development programme may promote satisfaction, community membership and feelings of achievement over time among its dancers. Dance can provide opportunities for enjoyment, self-expression, competence, positive relationships with others, autonomy, and fulfilment (e.g. Aujla & Farrer, 2015). While the current study cannot ascertain the extent to which *IRIS* contributes to life satisfaction it would be logical to assume that, for young people with a passion for a self-defining activity, dance may make a significant contribution to SWB.

Finally, research suggests that serious leisure activities may help participants with disabilities to more easily integrate and transition into mainstream groups or employment through enhanced competencies (Patterson & Pegg, 2009). *IRIS* is designed to equip dancers with disabilities with the skills, confidence and experience to enter further training, mainstream classes, and eventually the dance industry. As such, *IRIS* and other similar extracurricular programmes may enable young people with disabilities to overcome the barriers associated with physical activities like dance (Aujla & Redding, 2013), and to actively participate in an artistic community.

Limitations

There are a number of limitations to this study which are important to acknowledge. Firstly, the participants were a convenience sample drawn from groups already studying *IRIS* and had large variability in terms of age, experience, disability type and severity. This combined with the small sample size, particularly at Time 2, means that the results are not generalizable; instead the findings provide an initial understanding of the wellbeing of this under-researched population in dance. The lack of control

group means that the results could not directly be compared with young people with disabilities who were not part of *IRIS*; however, the use of normative data from the PWI helps to overcome this limitation and provide a comparison group.

Conclusion

The findings of this study indicate that young dancers with disabilities enrolled on a talent development programme have high levels of SWB, and that this remained stable over the course of an academic year. Although causality cannot be assumed, it would be logical to assume that attending *IRIS* contributed at least in part to the dancers' wellbeing. Future research is warranted to expand this study using a larger sample size, and to explore wellbeing and related concepts using qualitative methodologies.

References

Aujla, I. J., & Redding, E. (2013). Barriers to dance training for young people with disabilities. *British Journal of Special Education*, 40(2), 80-85.

Aujla, I. J., Nordin-Bates, S., & Redding, E. (2014a). A qualitative investigation of commitment to dance: Findings from the UK Centres for Advanced Training. *Research in Dance Education*, 15(2), 138-160.

Aujla, I. J., Nordin-Bates, S. M., Redding, E., & Jobbins, V. (2014b). Developing talent among young dancers: Findings from the UK Centres for Advanced Training. *Theatre, Dance and Performance Training*, 5(1), 15-30.

Aujla, I., & Farrer, R. (2015). The role of psychological factors in the career of the independent dancer. *Frontiers in Psychology*, 6. DOI: 10.3389/fpsyg.2015.01688.

Burkhardt, J., & Brennan, C. (2012). The effects of recreational dance interventions on the health and well-being of children and young people: A systematic review. *Arts and Health*, 4(2), 148-161.

Cabinet Office (2013). National wellbeing. Available at: <https://www.gov.uk/government/collections/national-wellbeing>, accessed on November 2017.

Casas, F., Sarriera, J. C., Alfaro, J., González, M., Malo, S., Bertran, I., ... & Weinreich, K. (2012). Testing the personal wellbeing index on 12–16 year-old adolescents in 3 different countries with 2 new items. *Social Indicators Research*, 105(3), 461-482.

Connolly, M., & Redding, E. (2010). *Dancing towards well-being in the third age: Literature review on the impact of dance on health and well-being among older people*. London: Trinity Laban.

Cummins R. A. (1997). 'Assessing quality of life', in Brown, R. (ed.) *Assessing Quality of Life for People with Disabilities*. Stanley Thornes, Cheltenham, UK, pp. 116–150.

Cummins R. A., McCabe M. P., Romeo Y., Reid S. & Waters L. (1997). An initial evaluation of the Comprehensive Quality of Life Scale – Intellectual Disability.

International Journal of Disability, Development and Education, 44, 7–19.

Cummins, R. A. (2010). Subjective wellbeing, homeostatically protected mood and depression: A synthesis. *Journal of Happiness Studies*, 11(1), 1-17.

Cummins, R. A., & Lau, A. L. D. (2005). *Personal Well-Being Index — Intellectual Disability (PWI-ID) Manual (3rd ed.)*. Melbourne: Deakin University.

Ehrich, L.C. (2010). Shall we dance? The story of the radiance dance project.

Australian Journal of Adult Learning, 50(2), 239-59.

Eid, M., & Diener, E. (2004). Global judgments of subjective well-being: Situational variability and long-term stability. *Social Indicators Research*, 65(3), 245-277.

Fuller, J., F. Jongsma, K. Milne, S. Venuti, & Williams, K. (2009). Art for art's sake: A qualitative study exploring the facilitation of creativity within disability services.

Accessible Arts, 1-8.

Goodgame, J. (2007). Beyond words: Dance and movement sessions with young people with social, emotional and behavioural difficulties in Estonia. *Support for Learning*, 22(2), 78-83.

Heady B., & Wearing A. (1992). *Understanding Happiness: A Theory of Subjective Well-being*. Longman Cheshire, Melbourne.

Karkou, V., & Glasman, J. (2004). Arts, education and society: The role of the arts in promoting the emotional well-being and social inclusion of young people. *Support for Learning*, 19(2), 57-65.

Kinder, K., & Harland, J. (2004). The arts and social inclusion: What's the evidence? *Support for Learning*, 19(2), 52-6.

Lee, Y., & McCormick, B. (2004). Subjective well-being of people with spinal cord injury: does leisure contribute? *Journal of Rehabilitation*, 70(3), 5-12.

McGillivray, J. A., Lau, A. L. D., Cummins, R. A., & Davey, G. (2009). The utility of the personal wellbeing index intellectual disability scale in an Australian sample. *Journal of Applied Research in Intellectual Disabilities*, 22(3), 276-286.

Nordin-Bates, S. M., Walker, I.J., Baker, J., Garner, J., Hardy, C., Irvine, S., Jola, C., Laws, H., & Blevins, P. (2011). Injury, imagery, and self-esteem in dance: Healthy minds in injured bodies? *Journal of Dance Medicine and Science*, 15(2), 76-85.

Ovenden, L. (2017). 'Dance for children with developmental dyspraxia', in BurrIDGE, S., & Svendler Nielsen, C. (eds.) *Dance, Access and Inclusion: Perspectives on Dance, Young People and Change*. Oxon: Routledge, pp. 31-34.

Pallant, J. (2005). *SPSS survival manual: A step by step guide to data analysis using SPSS for Windows (Version 12)*. Berkshire: Open University Press.

Patterson, I., & Pegg, S. (2009). Serious leisure and people with intellectual disabilities: Benefits and opportunities. *Leisure Studies*, 28(4), 387-402.

Roker, D., Player, K., & Coleman, J. (1998). Challenging the image: The involvement of young people with disabilities in volunteering and campaigning. *Disability & Society*, 13(5), 725-741.

Ryff, C. D. (1989). Happiness is everything, or is it? Explorations on the meaning of psychological well-being. *Journal of Personality and Social Psychology*, 57(6), 1069-1081.

Ryff, C. D., & Singer, B. (1996). Psychological well-being: Meaning, measurement, and implications for psychotherapy research. *Psychotherapy and Psychosomatics*, 65(1), 14-23.

Ryff, C.D., & Singer, B.H. (1998). 'The role of purpose in life and personal growth in positive human health', in P. T. P. Wong & P. S. Fry (eds.) *The Human Quest for Meaning: A Handbook of Psychological Research and Clinical Applications*. Mahwah, NJ: Erlbaum, pp. 213-235.

Seligman, M. (2011). *Flourish: A New Understanding of Happiness, Well-being-and How to Achieve Them*. Boston: Nicholas Brealey Publishing.

Shah, H., & Marks, N. (2004). *A Well-being Manifesto for a Flourishing Society*.

London: The New Economics Foundation.

Stebbins, R. (1992). *Amateurs, professionals, and serious leisure*. Montreal: McGill-Queen's University Press.

Tasiemski, T., Kennedy, P., Gardner, B. P., & Taylor, N. (2005). The association of sports and physical recreation with life satisfaction in a community sample of people with spinal cord injuries. *NeuroRehabilitation*, 20(4), 253-265.

Tomyn, A. J., & Cummins, R. A. (2011). The subjective wellbeing of high-school students: Validating the personal wellbeing index-school children. *Social Indicators Research*, 101(3), 405-418.

Zitomer, M. R. (2016). 'Dance Makes Me Happy': experiences of children with disabilities in elementary school dance education. *Research in Dance Education*, 17(3), 218-234.